

HCV Treatment by

Non-Physicians

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SPECIAL THANKS

By the end of this session, participants will be able to:

1. List at least 1 available HCV treatment resource for non-physicians and mid-levels
2. Name at least 1 treatment regimen for HCV

OBJECTIVES

- How do I integrate HCV treatment in my current practice?
- How will I know who to treat and who to refer out?
- What about all the paperwork?

WHERE DO I START?

1. Identify and link yourself into your local resources

- Gastroenterologists
- Hepatologists
- Local indigent care or infectious disease clinics
- Telemed programs such as St. Luke's
- Specialty Pharmacies

HCV TREATMENT

Start Small

- Identify At-Risk and Present Positives First

Familiarize

- Learn Paperwork and Protocols

Set Your Schedule

- Take One Referral a Month From Your Network

HCV TREATMENT

Don't Be Afraid to Agree First and
Ask Questions Second!

HCV TREATMENT

- Medications for Hepatitis C trending towards **single-tablet** and **oral-only** therapy
- Duration of therapy as little as 8 weeks, usually no more than 24 weeks with new available treatment regimens
- Lab schedule typically includes follow up 2 weeks after starting treatment, 4 weeks later, and every 4 weeks during treatment.

TREATMENT PROTOCOL

- Treatment regimen depends largely on the genotype, or subtype of HCV, assigned as numbers 1 through 6.
- Commonly used medications include Sovaldi (sofosbuvir), Harvoni (ledipasvir/sofosbuvir), Viekera Pak (ombitasvir/paritaprevir/ritonavir and dasabuvir)
- Depending on genotype, may be used in combination with ribavirin (usually between 1000 and 1200mg, though can be adjusted)
- New medication just approved: Daklinza (daclatasvir) to be used in combination with sofosbuvir

TREATMENT PROTOCOL

- 63 year-old African American male, treatment experienced with PEG over 10 years ago
- Co-infected HCV/HIV
- Vaccination
- Labs at 2 weeks, 4 weeks, monthly thereafter for course of 12 weeks
- Last month of therapy

CASE STUDY #1

- 25 year old Caucasian female, treatment naive
- Congestive Heart Failure with pacemaker
- Genotype 3a
- Vaccination
- Candidate for new therapy

CASE STUDY #2

- 56 year-old Caucasian male
- Esophageal varices in 2014 with subsequent transfusion and banding
- Vaccination
- Referral to gastroenterology for scans

CASE STUDY #3

- www.clinicaloptions.com “Clinical Care Options”
- www.hep-druginteractions.org “HCV Directly Acting Antivirals”
- www.cdc.gov/hepatitis/hcv/ “Viral Hepatitis-Hepatitis C Information”

WEB-BASED RESOURCES
